



Receipt  
PATENT #6

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Patent Application of:

Kathrin Berkner et al.

Application No.: 09/658,393

Filed: September 8, 2000

For: WAVELET-BASED IMAGE  
PROCESSING PATH

Examiner: Unknown

Art Unit: 2621

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REQUEST FOR CORRECTED FILING RECEIPT

Sir:

Enclosed is a copy of the Official Filing Receipt dated April 2, 2001, in connection with the above-identified patent application. It contains the following error(s):

1. The Applicant Kathrin Berkner's city of residence is erroneously stated as Palo Alto. The correct Applicant's city of residence is **Redwood City**, as evidenced by the mailing address on the signed Declaration, a copy of which is enclosed.


Please correct your records to reflect the above information and then forward to us a corrected filing receipt. The enclosed copy of the filing receipt is marked with the appropriate correction(s).

If you have any questions, please contact the undersigned.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Dated: 9/25/01

  
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/658,393	09/08/2000	2621	3010	074451.P110	11	120	8

*MDV*

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**BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN**  
**LOS ANGELES**

CONFIRMATION NO. 3421

## FILING RECEIPT



\*OC000000005917017\*

Date Mailed: 04/02/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

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Domestic Priority data as claimed by applicant

Foreign Applications

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Early Publication Request: No

## Title

Wavelet-based image processing path

Preliminary Class

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Bib Data Sheet

CONFIRMATION NO. 3421

<b>SERIAL NUMBER</b> 09/658,393	<b>FILING DATE</b> 09/08/2000 <b>RULE</b>	<b>CLASS</b> 382	<b>GROUP ART UNIT</b> 2621	<b>ATTORNEY DOCKET NO.</b> 074451.P110
<b>APPLICANTS</b> Kathrin Berkner, Redwood City, CA; Edward L. Schwartz, Sunnyvale, CA; Michael J. Gormish, Redwood City, CA;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 10/23/2000</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 120
<b>INDEPENDENT CLAIMS</b> 8				
<b>ADDRESS</b> Michael J Mallie Blakely Sokoloff Taylor & Zafman LLP Seventh Floor 12400 Wilshire Boulevard Los Angeles ,CA 90025-1026				
<b>TITLE</b> Wavelet-based image processing path				
<b>FILING FEE RECEIVED</b> 3010	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	